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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)**FY 2006**

(fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818))

Docket Number
49931-0033

In re Application of	Edward W. MERRILL et al.		
Application Number	09/764,445	Filed	January 19, 2001
For	RADIATION AND MELT TREATED ULTRA HIGH MOLECULAR WEIGHT POLYETHYLENE PROSTHETIC DEVICES		
Art Unit	1711	Examiner	S. Berman

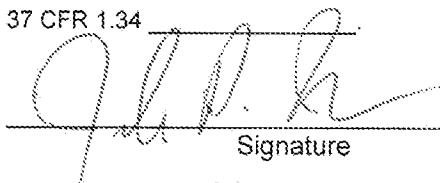
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter appropriate fee below):

	Fee	Small Entity Fee	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ 120	\$ 60	\$ _____
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ 450	\$ 225	\$ _____
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ 1020	\$ 510	\$ 1020.00
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ 1590	\$ 795	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ 2160	\$ 1080	\$ _____
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-3840 . I have enclosed a duplicate copy of this sheet.			

I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). attorney or agent of record. Registration Number: **33,715** attorney or agent under 37 CFR 1.34.

Registration number if acting under 37 CFR 1.34 _____



Signature

November 27, 2006
Date(202) 416-6800
Telephone Number**John P. Isaacson**
Typed or printed nameCustomer No. 61263

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.